Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I											
				(Column 1) (Column 2)				SMALL ENTITY TYPE			R THAN
TOTAL CLAIMS			42	47			RATE	FEE	OR <b>T</b>		ENTITY
F(	OR		NUMBER	NUMBER FILED		BER EXTRA	BASIC FE		OR	RATE BASIC FEE	FEE 740.00
TC	OTAL CHARGE	ABLE CLAIMS	62min	inus 20=	* 42	2	X\$ 9=	-		<b>—</b>	740.00
INI	DEPENDENT C	CLAIMS		ninus 3 =	*		<u> </u>		OR		756-
Мι	JLTIPLE DEPE	NDENT CLAIM P			<b></b>		X42=	<del> </del>	OR	X84=	252
* If the difference in column 1 is less than zero, enter "0" in column						-1 0 <sup>-1</sup>	+140=		OR	+280=	280
• •						column 2	TOTAL		OR	TOTAL	7028
_		CLAIMS AS A	MENUEL	(Colun	mn 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	IBER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
END	Total Independent	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ΑM		1		*** PENDENT	COL AIM	=	X42=		OR	X84=	,
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
	K. T. S.	(Column 1)	Many distribution and distribution days received the contract of	(Colum		(Column 3)	•		J		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IND I	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	* ENTATION OF MU	Minus	***		=	X42=		OR	X84=	
	THOTTIESE	NIAHON OF WIL	ILITE DEF	ENDENT	CLAIM		+140=		OR	+280=	
							TOTAL ADDIT. FEE			TOTAL	
		(Column 1)		(Colum		(Column 3)	ADDIT. I LL		^	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u> </u>	Total	<del> </del>	Minus	**		=	X\$ 9=		OR	X\$18=	
¥ ⊦	Independent	<u> </u>	Minus	***		=	X42=		<u> </u>	X84=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM				OR -		
" If the entry in column 1 is less than the entry in column 2 write "0" in column 3									OR	+280=	
***	t the "Highest Nun If the "Highest Nun	mber Previously Pai mber Previously Pai	id For" IN THIS aid For" IN THIS	S SPACE is I	less than	20, enter "20."	TOTAL ADDIT. FEE		OR A	TOTAL DDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEADDIT. FEE										mn 1.	

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

PB0178

CLAIMS AS FILED - PART I							SMALL ENTITY				OTHER THAN	
	STAL OLAMAG		(Column 1)		(Column 2)		T	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			54					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			54 minus 20=		* 34			X\$ 9=		OR	X\$18=	612
INDEPENDENT CLAIMS			( minus 3 =		* 3			X42=		OR	X84=	252
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=		OR	+280=	280
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	1884	
CLAIMS AS AMENDED - PART II										•	OTHER	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	** (	02	=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	6	=	Ī	X42=		OR	X84=	
	THOTTRESE	INTATION OF MIC	DETIFEE DEF	ENDENT	CLAIN			+140=		OR	+280=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colur	mn 2)	(Column 3)	A	DDIT. FEE		J • · · ·	ADDIT. FEE	
_		CLAIMS		HIGH	EST	(Coldinir 3)	Г	1	ADDI-			ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLAINA	=		X42=		OR	X84=	·
	THIOTTHEOL	TATION OF WIC	CHIP CE DEF	LNDLINI	CLAIM			+140=		OR	+280=	
								TOTAL		OR	TOTAL	
		(0.1		<i>.</i>			ΑI	DDIT. FEE L			ADDIT. FEE	
		(Column 1) CLAIMS		(Colun		(Column 3)	_	-				
<b>AMENDMENT C</b>		REMAINING AFTER AMENDMENT		NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	DETIPLE DEF	PENDENT	CLAIM		H			٠ı,		
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140= TOTAL		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												